

[Your Name]
[Your Address]
[City, State, Zip Code]
[Email Address]
[Phone Number]
[Date]
[Recipient Name]
[Department/Office Name]
[HHS Address]
[City, State, Zip Code]

Dear [Recipient Name],

Subject: Inquiry Regarding HHS Registration

I am writing to inquire about the registration process for [specific program or service] under the HHS. I would like to gather information regarding the following:

1. [Specific question or request #1]
2. [Specific question or request #2]
3. [Specific question or request #3]

I would greatly appreciate any guidance or resources you could provide to assist me in this matter. Thank you for your attention to my inquiry.

Sincerely,

[Your Name]
[Your Title/Position if applicable]